PAGE 1 / 38

Image# 14961613151

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| Foil Foil | r Other Than An Autr | iorizea Committee | Office Use Only |
|---|-------------------------------|--|--|
| 1. NAME OF TY COMMITTEE (in full) | PE OR PRINT ▼ | Example: If typing, type over the lines. | 12FE4M5 |
| American Academy of Fa | amily Physicians Po | olitical Action Commit | iee |
| | | <u> </u> | |
| | 1133 Connecticut Avenue, N | W | |
| ADDRESS (number and street) | Suite 1100 | | |
| Check if different than previously reported. (ACC) | Washington | | DC 20036 - |
| 2. FEC IDENTIFICATION NUM | IBER ▼ CIT | Y 🛦 | STATE ▲ ZIP CODE ▲ |
| C C00411553 | | S THIS NEW (N) O | R × AMENDED (A) |
| 4. TYPE OF REPORT (Choose One) | Report Due On: | 20 (M2) May 20 (I | (Non-Election Year Only) |
| (a) Quarterly Reports: | | 20 (M3) Jun 20 (M | (Non-Election Year Only) |
| April 15 Quarterly Report (Q1) | | 20 (M4) Jul 20 (M | 7) Oct 20 (M10) Jan 31 (YE) |
| July 15 | (C) 12-Day | Primary (12P) | General (12G) Runoff (12R) |
| Quarterly Report (Q2) October 15 | Report for the: | Convention (12C) | Special (12S) |
| Quarterly Report (Q3) January 31 Year-End Report (YE) | Election | n on | in the State of |
| July 31 Mid-Year Report (Non-election Year Only) (MY) | (d) 30-Day POST-Election | General (30G) | Runoff (30R) Special (30S) |
| Termination Report (TER) | Report for the: | n on | in the State of |
| 5. Covering Period 01 | 01 / 2014 | through 01 | M / D D / Y Y Y Y Y Y 31 2014 |
| I certify that I have examined this | Report and to the best of | my knowledge and belief it is | s true, correct and complete. |
| Type or Print Name of Treasurer | Hugh M Taylor MD | | |
| Signature of Treasurer Hugh M | Taylor MD | [Electronically Filed] | Date 07 14 2014 |
| NOTE: Submission of false, erroneou | us, or incomplete informatior | n may subject the person signir | ng this Report to the penalties of 2 U.S.C. §437g. |
| Office Use Only | | | FEC FORM 3X Rev. 12/2004 |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

Report Covering the Period: From: 01 01 2014 To: 01 31 2014

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|-----|--|-------------------------|-----------------------------------|
| 6. | (a) Cash on Hand January 1, 2014 | | 408793.60 |
| | (b) Cash on Hand at Beginning of Reporting Period | 408793.60 | |
| | (c) Total Receipts (from Line 19) | 71836.56 | 71836.56 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 480630.16 | 480630.16 |
| 7. | Total Disbursements (from Line 31) | 35543.65 | 35543.65 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 445086.51 | 445086.51 |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

| R | eport Covering the Period: From: | 01 2014 | To: 01 31 2014 |
|-----|--|-------------------------------|-----------------------------------|
| | I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| 11. | Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees | | |
| | (i) Itemized (use Schedule A) | 46606.66 | 46606.66 |
| | (ii) Unitemized(iii) TOTAL (add | 24705.75 | 24705.75 |
| | Lines 11(a)(i) and (ii) | 71312.41 | 71312.41 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| 4.0 | 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 71312.41 | 71312.41 |
| 12. | Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. | All Loans Received | 0.00 | 0.00 |
| | Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| 16. | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made | 524.15 | 524.15 |
| | to Federal Candidates and Other Political Committees | 0.00 | 0.00 |
| | Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. | Transfers from Non-Federal and Levin Funds (a) Non-Federal Account | | |
| | (from Schedule H3) | 0.00 | 0.00 |
| | (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| 19. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶ | 71836.56 | 71836.56 |
| 20. | Total Federal Receipts (subtract Line 18(c) from Line 19)▶ | 71836.56 | 71836.56 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| | II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|--|----------------------------|-----------------------------------|
| 21. | Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | Calonida Tour to Bute |
| | (i) Federal Share | 0.00 | 0.00 |
| | (ii) Non Fodoval Chare | 0.00 | 0.00 |
| | (ii) Non-Federal Share(b) Other Federal Operating | 0.00 | 5.50 |
| | Expenditures | 543.65 | 543.65 |
| | (c) Total Operating Expenditures | E42 65 | E 42 GE |
| , | (add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party | 543.65 | 543.65 |
| | Committees | 0.00 | 0.00 |
| 3. | Contributions to Federal Candidates/Committees and Other Political Committees | 35000.00 | 35000.00 |
| ١. | Independent Expenditures | | |
| · | (use Schedule E) Coordinated Party Expenditures | 0.00 | 0.00 |
| | (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | , , , 0.00 |
| 3. | Loan Repayments Made | 0.00 | 0.00 |
| | Loans MadeRefunds of Contributions To: | 0.00 | 0.00 |
| | (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| | (d) Total Contribution Refunds | | |
| | (add Lines 28(a), (b), and (c))▶ | 0.00 | 0.00 |
| 9. | Other Disbursements | 0.00 | 0.00 |
| ١. | Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity | | |
| | (from Schedule H6) (i) Federal Share | 0.00 | 0.00 |
| | (ii) "Levin" Share | 0.00 | 0.00 |
| | (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| | (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | 0.00 | 0.00 |
| | Total Disbursements (add Lines 21(c), 22, | | |
| | 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 35543.65 | 35543.65 |
| | Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) | | |
| | from Line 31) | 35543.65 | 35543.65 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 71312.41 | 71312.41 |
| 4. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 71312.41 | 71312.41 |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 543.65 | 543.65 |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 524.15 | 524.15 |
| 8. Net Operating Expenditures (subtract Line 37 from Line 36) | 19.50 | 19.50 |

1mage# 14961613156 PAGE 6 / 38

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F3XA

Transaction ID:

Amended February 20 2014 report - amended to capture changes reported in second amendment to August 20 2013

report

Form/Schedule: Transaction ID:

| FOR LI | PAGE | | 7 | OF | | 38 | | | |
|------------------|------|-----|---|-----|--|----|--|--|----|
| (check only one) | | | | | | | | | |
| X 11 | a | 11b | | 11c | | 12 | | | |
| 13 | | 14 | | 15 | | 16 | | | 17 |

| | the name and address of any political committee t | |
|---|---|---|
| NAME OF COMMITTEE (In Full) | | |
| American Academy of Family | Physicians Political Action Commit | ttee |
| Full Name (Last, First, Middle Initial) Stephen Carl Albrecht MD | | Date of Receipt |
| Mailing Address 5909 Swayne Dr NE | | 01 27 2014 |
| City | State Zip Code | Transaction ID : C2622704 |
| Olympia | WA 98516-9547 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Capital Physicians LLC | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) Kurt Bradley Angstman MD | | Date of Receipt |
| Mailing Address 1697 Century Valley Rd NE | <u> </u> | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | 01 02 2014 Transaction ID : C2522658 |
| Rochester | MN 55906-7708 | Amount of Each Receipt this Period |
| FEC ID number of contributing | 2000 1100 | |
| federal political committee. | C | 300.00 |
| Name of Employer | Occupation |] |
| Mayo Clinic | Family Physician |] |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) Lindsay Kathryn Botsford MD | | Date of Receipt |
| Mailing Address 2506 Hazard St | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527443 |
| Houston | TX 77019-6756 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer | Occupation | - |
| Memorial Herman Hospital System | Physician | _ |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 205.02 | |
| Other (specify) ▼ | 365.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1165.00 |
| . 5 (, , | | |
| TOTAL This Period (last page this line numb | er only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR L | PAGE | | 8 | OF | | 38 | | | | |
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| (check only one) | | | | | | | | | | |
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| 13 | 3 | 14 | | 15 | | 16 | | | 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| or for commercial purposes, other than using th | e name and address of any political committee to | solicit contributions from such committee. |
|--|--|---|
| / | Physicians Political Action Committ | tee |
| Full Name (Last, First, Middle Initial) A. Robert C M Bourne MD Mailing Address 1538 Dwight St | | Date of Receipt |
| City Redlands | State Zip Code CA 92373-7013 | 01 02 2014 Transaction ID : C2522811 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 370.00 | |
| Full Name (Last, First, Middle Initial) B. Ellen Sandra Brull MD Mailing Address 830 Arbor Ln | | Date of Receipt |
| City Glenview | State Zip Code IL 60025-3234 | 01 29 2014 Transaction ID : C2632194 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 3000.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 3000.00 | |
| Full Name (Last, First, Middle Initial) C. Paul Eric Buehrens MD | | Date of Receipt |
| Mailing Address 12710 Totem Lake Blvd NE | | 01 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Kirkland | State Zip Code WA 98034-2907 | Transaction ID : C2522812 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 3670.00 |
| TOTAL This Period (last page this line number | <u> </u> | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | | 9 | OF | | 38 |
|------------------|-----|--|-----|--|------|--|----|----|--|----|
| (check only one) | | | | | | | | | | |
| X | 11a | | 11b | | 11c | | 12 | | | |
| | 13 | | 14 | | 15 | | 16 | ; | | 17 |

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| or for commercial purposes, other than using the | ne name and address of any political committee to | solicit contributions from such committee. |
|--|---|--|
| NAME OF COMMITTEE (In Full) | Physicians Political Action Committ | |
| Full Name (Last, First, Middle Initial) 1. Domenic Wm Casablanca MD | | Date of Receipt |
| Mailing Address 4 Corporate Dr Ste 195 | | 01 29 2014 |
| City | State Zip Code | Transaction ID : C2632569 |
| Shelton | CT 06484-6240 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 365.00 | |
| Full Name (Last, First, Middle Initial) 3. Judith Chamberlain MD | | Date of Receipt |
| Mailing Address 10 Sea Grass Farm Rd | 01-1- 7'- 0-1- | 01 15 2014 |
| City | State Zip Code ME 04011-7841 | Transaction ID : C2527405 |
| Brunswick | ME 04011-7841 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 3000.00 |
| Name of Employer | Occupation | |
| Aetna | Medical Director, Medicaid Business Un | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 3000.00 | |
| Full Name (Last, First, Middle Initial) Charles E Christianson MD | | Date of Receipt |
| Mailing Address 3701 15th Ave S | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527471 |
| Grand Forks | ND 58203-2817 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| University of North Dakota | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | Aggregate real to bate ¥ | |
| Other (specify) ▼ | 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 3865.00 |
| TOTAL This Period (last page this line number | r only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | • | 10 | OF | | 38 | |
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| (c | (check only one) | | | | | | | | | | |
| | × | 11a | | 11b | | 11c | | 12 | | | |
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| or for commercial purposes, other than usin | ng the name and address of any political committee to | o solicit contributions from such committee. |
|--|---|--|
| NAME OF COMMITTEE (In Full) American Academy of Fami | ly Physicians Political Action Commit | tee |
| Full Name (Last, First, Middle Initial) Cecilia Ann Collins MD | | Date of Receipt |
| Mailing Address 383 N Roscoe Blvd | | 01 06 2014 |
| City Ponte Vedra Beach | State Zip Code FL 32082-2145 | Transaction ID : C2524126 |
| FEC ID number of contributing | | Amount of Each Receipt this Period |
| federal political committee. | C | 520.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) | 520.00 | |
| Full Name (Last, First, Middle Initial) 3. Mark E Collins MD | <u>'</u> | Date of Receipt |
| Mailing Address 354 N Maple Ave | | 01 15 _2014 _ |
| City | State Zip Code | Transaction ID : C2534180 |
| Wood Dale | IL 60191-1539 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 365.00 |
| Name of Employer | Occupation | - |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 365.00 | |
| Full Name (Last, First, Middle Initial) C. Thomas Allen Cornwell MD | <u>'</u> | Date of Receipt |
| Mailing Address 2315 S Circle Dr | | 01 09 2014 _ |
| City | State Zip Code | Transaction ID : C2526270 |
| Palatine | IL 60067-7747 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | - |
| Cadence Health | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 250.00 | |
| SUBTOTAL of Receipts This Page (option | al) | 1135.00 |
| | · | |
| TOTAL This Period (last page this line nur | mber only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | PAGE | . 1 | 11 | OF | 38 | | | |
|------------------|----|---------|------|-----|----|-----|----|----|---|----|
| (c | he | ck only | or | ne) | | | | | | |
| [| X | 11a | | 11b | | 11c | | 12 | | |
| | | 13 | | 14 | | 15 | | 16 | ; | 17 |

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NAME OF COMMITTEE (In Full)

| American Academy of Family | Physicians Political Action Commit | tee |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Steven A Crawford MD | | Date of Receipt |
| Mailing Address 900 NE 10th St | | 01 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : C2534101 |
| Oklahoma City | OK 73104-5420 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 416.66 |
| Name of Employer | Occupation | 1 |
| University of Oklahoma | Physician Faculty | |
| Receipt For: | Aggregate Year-to-Date ▼ | - |
| Primary General Other (specify) ▼ | 416.66 | |
| Full Name (Last, First, Middle Initial) 3. R Wesley Dean Jr | ' | Date of Receipt |
| Mailing Address 201 E Emory Rd | | 01 20 2014 |
| City | State Zip Code | Transaction ID : C2534462 |
| Powell | TN 37849-4016 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer | Occupation | - |
| Summit Medical Group, PLLC | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 00 0 | |
| Other (specify) ▼ | 365.00 | |
| Full Name (Last, First, Middle Initial) Jason B Dees MD | - ' | Date of Receipt |
| Mailing Address 620 W Longview Dr | | 01 02 2014 |
| City | State Zip Code | Transaction ID : C2522663 |
| New Albany | MS 38652-2415 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1500.00 |
| Name of Employer | Occupation | - |
| Magnolia Health Plan | Chief Medical Director | |
| Receipt For: | Aggregate Year-to-Date ▼ | - |
| Primary General | Aggregate Tear-to-Date ▼ | |
| Other (specify) ▼ | 1500.00 | |
| SUBTOTAL of Receipts This Page (optional |) | 2281.66 |
| TOTAL This Period (last page this line numl | ber only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | PAGE | 12 | OF | 38 | |
|------------------|-------------|------|------|-----|----|-----|----|
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| > | 1 1a | 11b | | 11c | 12 | | |
| | 13 | 14 | | 15 | 16 | . [| 17 |

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| or for commercial purposes, other than using t | he name and address of any political committee to | solicit contributions from such committee. |
|---|--|---|
| NAME OF COMMITTEE (In Full) American Academy of Family | Physicians Political Action Committ | ee |
| Full Name (Last, First, Middle Initial) Daniel J Derksen MD | | Date of Receipt |
| Mailing Address 9920 N Desert Sky Pl | | 01 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Oro Valley | State Zip Code AZ 85737-6842 | Transaction ID : C2527486 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer Self Employed Receipt For: Primary General | Occupation Physician Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) Carlos Alberto Ermocilla MD Mailing Address 7083 April Wind Ave | | Date of Receipt 01 06 2014 |
| City Las Vegas | State Zip Code NV 89131-0134 | Transaction ID : C2524117 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) . Raja S Fattaleh | | Date of Receipt |
| Mailing Address PO BOX 333 | | 01 20 2014 |
| City Putnam | State Zip Code CT 06260-0333 | Transaction ID : C2534488 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer Priorty Family Healthcare Receipt For: □ Primary □ General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 365.00 | |
| SUBTOTAL of Receipts This Page (optional). | • | 1615.00 |
| TOTAL This Period (last page this line number | er only) | |

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE | | FAGE | . 13 0 | 30 |
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| (check only | one) | | | |
| X 11a | 11b | 11c | 12 | |
| 13 | 14 | 15 | 16 | 17 |

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| or for commercial purposes, other than using t | the name and address of any political committee to | solicit contributions from such committee. |
|--|--|---|
| NAME OF COMMITTEE (In Full) American Academy of Family | Physicians Political Action Committ | tee |
| Full Name (Last, First, Middle Initial) Wanda D Filer MD Mailing Address 510 Aqua Ct | | Date of Receipt |
| City York | State Zip Code PA 17403-3623 | 01 30 2014 Transaction ID : C2636866 |
| FEC ID number of contributing federal political committee. | C 1/403-3623 | Amount of Each Receipt this Period 350.00 |
| Name of Employer Strategic Health Institute | Occupation Family Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |
| Full Name (Last, First, Middle Initial) Seth Yawki Flagg MD Mailing Address 9129 Bradford Rd | | Date of Receipt O1 23 2014 |
| City Silver Spring | State Zip Code MD 20901-4917 | 01 23 2014 |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer USN | Occupation Physcain | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) J H Gardner MD | | Date of Receipt |
| Mailing Address PO Box 518 | 7. 6 | 01 02 / Y = Y = Y = Y |
| City Buffalo | State Zip Code IA 52728-0518 | Transaction ID : C2522815 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 400.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |
| SUBTOTAL of Receipts This Page (optional). | | 1250.00 |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| or for commercial purposes, other than using th | ne name and address of any political committee to | solicit contributions from such committee. |
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| NAME OF COMMITTEE (In Full) | Physicians Political Action Committ | |
| Full Name (Last, First, Middle Initial) A. David J Gavareski MD | | Date of Receipt |
| Mailing Address 1505 Lakeway PI | | 01 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : C2522667 |
| Bellingham | WA 98229-5133 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) 3. Daron W Gersch MD | | Date of Receipt |
| Mailing Address 310 Golfview Dr | | 01 30 2014 |
| City | State Zip Code | Transaction ID : C2632671 |
| Albany | MN 56307-9315 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 370.00 | |
| Full Name (Last, First, Middle Initial) Cina Greco-Tartaglia MD | | Date of Receipt |
| Mailing Address 1335 Sunny Ridge Rd | | 01 06 2014 |
| City | State Zip Code | Transaction ID : C2524125 |
| Mohegan Lake | NY 10547-1432 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 250.00 | |
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| | the name and address of any political committee | |
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| , | Physicians Political Action Commi | ttee |
| Full Name (Last, First, Middle Initial) Jeffrey Scott Grove MD Mailing Address 44 Reymant St | | Date of Receipt |
| Mailing Address 11 Baymont St Apt 1002 City | State Zip Code | 01 06 2014 |
| Clearwater | FL 33767-1720 | Transaction ID : C2524123 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 1000.00 |
| Name of Employer Self Employed | Occupation Physician | _ |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |
| Full Name (Last, First, Middle Initial) Lori J Heim MD | | Date of Receipt |
| Mailing Address 250 Hollybrook Farm Ln | | 01 29 2014 |
| City Vass | State Zip Code NC 28394-8952 | Transaction ID : C2632568 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer Self Employed | Occupation Physician | _ |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) Douglas E Henley MD | | Date of Receipt |
| Mailing Address 11400 Tomahawk Creek Pl | kwy | 01 01 2014 |
| City Leawood | State Zip Code KS 66211-2680 | Transaction ID : C2521871 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 2500.00 |
| Name of Employer | Occupation | - |
| American Academy of Family Physicians Receipt For: | Family Physician/CEO | _ |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |
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| NAME OF COMMITTEE (In Full) | the name and address of any political committee Physicians Political Action Commi | |
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| Full Name (Last, First, Middle Initial) Ernesto Herfter Herfter-Bueno MD Mailing Address 7315 Golden Glow Way NE City Albuquerque FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) | State Zip Code NM 87113-1329 C Occupation Physician Aggregate Year-to-Date ▼ 300.00 | Date of Receipt 01 02 2014 Transaction ID: C2522807 Amount of Each Receipt this Period 300.00 |
| Full Name (Last, First, Middle Initial) Richard W Honke MD Mailing Address 401 W Glynn Dr City Parkston FEC ID number of contributing federal political committee. Name of Employer Avera St Benedict CRHC Receipt For: Primary General Other (specify) | State Zip Code SD 57366-9605 C Occupation Physician Aggregate Year-to-Date ▼ 370.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Richard H Jones MD Mailing Address 106 W Howell Ave City Alexandria FEC ID number of contributing federal political committee. Name of Employer US Government Receipt For: Primary General Other (specify) | State Zip Code VA 22301-1508 C Occupation Physician Aggregate Year-to-Date ▼ 1000.00 | Date of Receipt O1 O2 2014 Transaction ID : C2522670 Amount of Each Receipt this Period |
| SUBTOTAL of Receipts This Page (optional). | > | 1670.00 |

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| or for commercial purposes, other than using the | name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | | |
| American Academy of Family P | hysicians Political Action Committe | ee |
| Full Name (Last, First, Middle Initial) A. Samuel M Jones MD | | Date of Receipt |
| Mailing Address 10145 Community Ln | | 01 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : C2527426 |
| Fairfax Station | VA 22039-2530 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 400.00 |
| Name of Employer | Occupation | |
| VCU-Fairfax Family Practice Center | Family Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 400.00 | |
| Full Name (Last, First, Middle Initial) Vincent D Keenan CAE | | Date of Receipt |
| Mailing Address Exec Vice President - IL AFP | | M = M / D = D / Y = Y = Y |
| 4756 Main St | State 7th Code | 01 29 2014 |
| City | State Zip Code IL 60532-1724 | Transaction ID : C2622709 |
| Lisle | IL 60532-1724 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | |
| Illinois Academy of Family Physicians | Association Exec. | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. Rick Kellerman Md Kellerman MD | | Date of Receipt |
| Mailing Address 521 N Armour St | | 01 29 2014 |
| City | State Zip Code | Transaction ID : C2632498 |
| Wichita | KS 67206-1513 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 1000.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 1000.00 | |
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| NAME OF COMMITTEE (In Full) | | |
| American Academy of Family F | Physicians Political Action Committ | tee |
| Full Name (Last, First, Middle Initial) A. Stanley M Kozakowski MD | | Date of Receipt |
| Mailing Address 13213 Reeder St | | 01 27 2014 |
| City | State Zip Code | Transaction ID : C2616578 |
| Overland Park | KS 66213-3657 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | 1 |
| American Academy of Family Physicians | Medical Education Administration | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 00 0 | |
| Other (specify) ▼ | 370.00 | |
| Full Name (Last, First, Middle Initial) Kevin K Kurohara MD | | Date of Receipt |
| Mailing Address 75 Puuhonu Pl | | M = M / D = D / Y = Y = Y |
| Ste 205 | 014 | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527438 |
| Hilo | HI 96720-2000 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | 1 |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. Paul Alan Lazar MD | | Date of Receipt |
| Mailing Address G3230 Beecher Rd Ste 1 | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527477 |
| Flint | MI 48532-3604 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 370.00 |
| Name of Employer | Occupation | 1 |
| McLaren | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 370.00 | |
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| NAME OF COMMITTEE (In Full) | | |
| American Academy of Famil | y Physicians Political Action Commi | ttee |
| Full Name (Last, First, Middle Initial) A. Colleen C Lyons MD | | Date of Receipt |
| Mailing Address 2874 N Carson St Ste 12 | 7 | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527393 |
| Carson City | NV 89706-1681 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 750.00 |
| Name of Employer | Occupation | † |
| Self-Employed | Family Medicine Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | - |
| Primary General | Aggregate real to bate V | |
| Other (specify) ▼ | 750.00 | |
| Full Name (Last, First, Middle Initial) Michael L Madden MD | | Date of Receipt |
| Mailing Address 4907 Windermere Blvd | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527461 |
| Alexandria | LA 71303-2459 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 400.00 |
| Name of Employer | Occupation | |
| L.S. U. HSC | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General Other (specify) ▼ | 400.00 | |
| Full Name (Last, First, Middle Initial) Sarah Tully Marks MD | | Date of Receipt |
| Mailing Address 3809 N Morris Blvd | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527421 |
| Shorewood | WI 53211-2219 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | 1 |
| University of Kansas; School of Medici | Assistant Professor | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 0.0 | |
| Other (specify) ▼ | 370.00 | |
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| Full Name (Last, First, Middle Initial) | y Physicians Political Action Commit | |
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| Pamela H McDonald MD | | Date of Receipt |
| Mailing Address 6056 44th Ave NE | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527474 |
| Seattle | WA 98115-7514 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) Kevin P Mikus Mikus | ' | Date of Receipt |
| Mailing Address 332 Sam Newell Rd Ste 2 | | M = M / D = D / Y = Y = Y |
| CMC-Matthews Medical City | Plaza State Zip Code | 01 04 2014 |
| Matthews | NC 28105 | Transaction ID : C2523036 Amount of Each Receipt this Period |
| | | Amount of Lach Necelpt this Fellou |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | |
| Carolinas HealthCare System | Family Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) Cynthia Morris MD | 1 | Date of Receipt |
| Mailing Address 182 Yulupa Cir | | 01 15 2014 |
| City | State Zip Code CA 95405-5136 | Transaction ID : C2527404 |
| Santa Rosa | CA 95405-5136 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | 1 |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) | 300.00 | |

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| | R LINE | PAGE | 2 | 21 | OF | | 38 | | | | |
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) James Mumford MD Date of Receipt Mailing Address 16 E 16th St 2014 15 City Zip Code State Transaction ID: C2534209 NY New York 10003-3105 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Lawrence Munger MD Date of Receipt Mailing Address 10522 Ballentine St 01 15 2014 City State Zip Code Transaction ID: C2527482 Overland Park KS 66214-3047 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation St. Lukes Medical Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. R W Nicholson MD Date of Receipt Mailing Address 801 Cobblestone Dr 02 2014 01 Zip Code City State Transaction ID: C2522806 IN Evansville 47715-4288 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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| or for commercial purposes, other than using | g the name and address of any political committee t | | | | | | |
|---|---|--------------------------------------|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) American Academy of Family | y Physicians Political Action Commit | ttee | | | | | |
| Full Name (Last, First, Middle Initial) A. W Lanier Nicholson MD | | Date of Receipt | | | | | |
| Mailing Address 563 Oak Ridge Dr | Mailing Address 563 Oak Ridge Dr | | | | | | |
| City | State Zip Code | 01 06 2014 Transaction ID : C2524131 | | | | | |
| Hiawassee | GA 30546-2224 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | | |
| Name of Employer | Occupation | 1 | | | | | |
| Self Employed | Physician | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | |
| Primary General Other (specify) ▼ | 250.00 | | | | | | |
| Full Name (Last, First, Middle Initial) 3. Yvette Oquendo Md Oquendo-B | | Date of Receipt | | | | | |
| Mailing Address 7442 Weather Worn Way | | 01 02 2014 | | | | | |
| City | State Zip Code | Transaction ID : C2522808 | | | | | |
| Columbia | MD 21046-1480 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 500.00 | | | | | |
| Name of Employer | Occupation | 1 | | | | | |
| Self Employed | Physician | | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | | | | | |
| Full Name (Last, First, Middle Initial) C. David E Page MD | | Date of Receipt | | | | | |
| Mailing Address 6204 Vengo Ct | | 01 06 2014 | | | | | |
| City | State Zip Code | Transaction ID : C2524132 | | | | | |
| Alexandria | VA 22312-1242 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 365.00 | | | | | |
| Name of Employer | Occupation | † | | | | | |
| Self Employed | Physician | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 | | | | | |
| Primary General Other (specify) ▼ | 365.00 | | | | | | |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Charles Ted Paulk MD Date of Receipt Mailing Address 1502 Colgate Ct 2014 15 City State Zip Code Transaction ID : C2527459 36303-5909 Dothan AL Amount of Each Receipt this Period FEC ID number of contributing 370.00 federal political committee. Name of Employer Occupation 1st MED of Dothan Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian Robert Penti MD Date of Receipt Mailing Address 309 Allston St 01 30 2014 City State Zip Code Transaction ID: C2632740 MA Brighton 02135-7692 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Steven Keith Perkins MD Date of Receipt Mailing Address Po Box 126 2014 01 15 City State Zip Code Transaction ID: C2527465 IA Waukon 52172-0126 Amount of Each Receipt this Period FEC ID number of contributing

250.00

С

Occupation Physician

Aggregate Year-to-Date ▼

250.00

federal political committee.

Other (specify)

General

Name of Employer

Primary

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| , , , | Physicians Political Action Commit | tee |
| Full Name (Last, First, Middle Initial) Bryan Anthony Picou MD | | Date of Receipt |
| Mailing Address 1029 Keyser Ave Ste G # A | | 01 02 , 2014 |
| City | State Zip Code | Transaction ID : C2522632 |
| Natchitoches | LA 71457-6215 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | |
| Natchitoches Medical Clinic | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | | |
| Other (specify) ▼ | 370.00 | |
| Full Name (Last, First, Middle Initial) Marguerite B Picou MD | | Date of Receipt |
| Mailing Address 1029 Keyser Ave | | M = M / D = D / Y = Y = Y |
| Ste G | Otata Zin Cada | 01 02 2014 |
| City | State Zip Code LA 71457-6215 | Transaction ID : C2522631 |
| Natchitoches | LA 71457-6215 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | - |
| Self-Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 370.00 | |
| Full Name (Last, First, Middle Initial) . William E Raduege MD | | Date of Receipt |
| Mailing Address PO Box 553 | | 01 02 2014 |
| City | State Zip Code | Transaction ID : C2522649 |
| Woodruff | WI 54568-0553 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | - |
| William E Raduege, MD, SC (Corporation | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | - |
| Primary General | . agregate real to bate v | |
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| NAME OF COMMITTEE (In Full) | ly Physicians Political Action Committee | |
|--|--|--|
| Full Name (Last, First, Middle Initial) Stephen D Richards DO Mailing Address 404 E Kennedy St City Algona FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) | State Zip Code IA 50511-3448 C Occupation Physician Aggregate Year-to-Date ▼ 1500.00 | Date of Receipt 01 06 2014 Transaction ID: C2523718 Amount of Each Receipt this Period 1500.00 |
| Full Name (Last, First, Middle Initial) Sarah L Sams MD Mailing Address 2994 Frazell Rd | l | Date of Receipt |
| City Hilliard FEC ID number of contributing federal political committee. | State Zip Code OH 43026-9785 | O1 29 2014 Transaction ID : C2632197 Amount of Each Receipt this Period 1200.00 |
| Name of Employer Self Employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 1200.00 | |
| Full Name (Last, First, Middle Initial) Lisa Marie Sandvig Mailing Address 8965 E Florida Ave Apt 11-303 City Denver FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) | State Zip Code CO 80247-2822 C Occupation Physician Aggregate Year-to-Date ▼ 250.00 | Date of Receipt O1 30 2014 Transaction ID : C2635849 Amount of Each Receipt this Period 250.00 |
| SUBTOTAL of Receipts This Page (options | al) > | 2950.00 |
| TOTAL This Period (last page this line nur | mber only) | |

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| | and Statements may not be sold or used by any per og the name and address of any political committee | |
|---|---|---|
| NAME OF COMMITTEE (In Full) | h. Dhuaisiana Dalitical Astica Commi | *** |
| / American Academy of Fami | ly Physicians Political Action Commi | nee |
| Full Name (Last, First, Middle Initial) Niranjan M Selvarajah MD | | Date of Receipt |
| Mailing Address 36 Ironwood Road | | 01 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : C2632792 |
| New Hartford | NY 13421-1851 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 550.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 550.00 | |
| Full Name (Last, First, Middle Initial) Aaron Burl Shives MD | | Date of Receipt |
| Mailing Address 350 28th Ave SE | | 01 15 2014 _ |
| City | State Zip Code | Transaction ID : C2527437 |
| Watertown | SD 57201-8403 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | 1 |
| federal political committee. | C | 370.00 |
| Name of Employer | Occupation | |
| Brown Clinic | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 270.00 | |
| Other (specify) ▼ | 370.00 | |
| Full Name (Last, First, Middle Initial) C. Joseph Douglas Smith MD | | Date of Receipt |
| Mailing Address 5722 Gardner Ln | | 01 15 2014 _ |
| City | State Zip Code | Transaction ID : C2527447 |
| Bridgewater | VA 22812-3614 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | 1 |
| Self Employed | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 270.00 | |
| Other (specify) ▼ | 370.00 | |
| SUBTOTAL of Receipts This Page (option | al) | 1290.00 |
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| TOTAL This Period (last page this line nur | mber only) | |

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| | the name and address of any political committee t | |
|--|---|---------------------------------------|
| NAME OF COMMITTEE (In Full) | | |
| / American Academy of Family | Physicians Political Action Commit | mee |
| Full Name (Last, First, Middle Initial) A. Gil Solomon MD | | Date of Receipt |
| Mailing Address 24508 Indian Hill Ln | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527452 |
| West Hills | CA 91307-3832 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Anthem Blue Cross | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ |] |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) 3. Gregory J Steinmetz MD | | Date of Receipt |
| Mailing Address 150 Bluff Ave | | 01 15 _2014 _ |
| City | State Zip Code | Transaction ID : C2527435 |
| Cranston | RI 02905-3727 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | |
| federal political committee. | C | 300.00 |
| Name of Employer | Occupation | 1 |
| APCM | Family Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) C. John F Tabachnick MD | | Date of Receipt |
| Mailing Address 714 Hanford PI | | 01 15 2014 |
| City | State Zip Code | 01 15 2014 Transaction ID : C2527396 |
| Westfield | NJ 07090-4332 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer | Occupation | - |
| Westfield Family Practice | Physician | 4 |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 365.00 | |
| Other (specify) ▼ | 365.00 | |
| SUBTOTAL of Receipts This Page (optional) |) | 1165.00 |
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| | the name and address of any political committee t | |
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| NAME OF COMMITTEE (In Full) | | |
| American Academy of Family | Physicians Political Action Commit | ttee |
| Full Name (Last, First, Middle Initial) 1. Hugh M Taylor MD | | Date of Receipt |
| Mailing Address 15 Railroad Ave | | 01 27 2014 |
| City | State Zip Code | Transaction ID : C2616591 |
| South Hamilton | MA 01982-2218 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 5000.00 |
| Name of Employer | Occupation | † |
| Family Medicine Associates LLC | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 7 |
| Primary General | 55 0 | |
| Other (specify) ▼ | 5000.00 | |
| Full Name (Last, First, Middle Initial) 3. Daniel J Van Durme MD | | Date of Receipt |
| Mailing Address 7023 Dardwood Ln | | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527456 |
| Tallahassee | FL 32312-3511 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer | Occupation | 7 |
| FSU College of Medicine | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ |] |
| Primary General Other (specify) ▼ | 370.00 | |
| Full Name (Last, First, Middle Initial) C. Daniel A Walters MD | <u> </u> | Date of Receipt |
| Mailing Address 2304 E County Road 950 I | N | 01 15 2014 |
| City | State Zip Code | Transaction ID : C2527479 |
| Seymour | IN 47274-8155 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 400.00 |
| Name of Employer | Occupation | † |
| Caring Family Physicians | Physician | j |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 400.00 | |
| SUBTOTAL of Receipts This Page (optional) | · | 5770.00 |
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Academy of Family Physicians Political Action Committee

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|---|---|---|
| Full Name (Last, First, Middle Initial) A. Robert J Weber MD | | Date of Receipt |
| Mailing Address 1375 Meadowridge Rd | | 01 30 2014 |
| City Watsonville | State Zip Code CA 95076-0356 | Transaction ID : C2632783 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 370.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 370.00 | |
| Full Name (Last, First, Middle Initial) 3. Richard Andre Wherry MD | | Date of Receipt |
| Mailing Address 59 Tipton Dr City | State Zip Code | 01 05 2014 |
| Dahlonega | GA 30533-1603 | Transaction ID : C2523120 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Chestatee Regional Hospital | Occupation Family Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) Christopher Nathan White MD | | Date of Receipt |
| Mailing Address 888 S Hill Rd | | 01 30 2014 |
| City Ventura | State Zip Code CA 93003-8400 | Transaction ID : C2632791 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 400.00 |
| Name of Employer Self Employed | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Jason Wickersham MD Date of Receipt Mailing Address 401 W Glynn Dr 02 2014 City Zip Code State Transaction ID : C2522454 SD 57366-9605 Parkston Amount of Each Receipt this Period FEC ID number of contributing C 370.00 federal political committee. Name of Employer Occupation Family Physician Avera St Benedict Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia R Witte MD Date of Receipt Mailing Address 1022 Midland St 01 2014 27 City State Zip Code Transaction ID: C2622701 WI Madison 53715-1922 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Group Health Cooperative** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. J Mack Worthington MD Date of Receipt Mailing Address 1100 E 3rd St 2014 01 06 City Zip Code State Transaction ID: C2524118 TN Chattanooga 37403-2241 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Physician Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General

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| or for commercial purposes, other than using | g the name and address of any political committee to | solicit contributions from such committee. |
|---|--|--|
| NAME OF COMMITTEE (In Full) American Academy of Famil | y Physicians Political Action Commit | tee |
| Full Name (Last, First, Middle Initial) A. David P Wright MD Mailing Address 1313 Red River St Ste 10 | 00 | Date of Receipt |
| City | State Zip Code TX 78701-1923 | 01 02 2014 Transaction ID : C2522652 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 370.00 |
| Name of Employer Seton Hospital | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 370.00 | |
| Full Name (Last, First, Middle Initial) Mailing Address | | Date of Receipt |
| City | State Zip Code | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | |
| Name of Employer | Occupation | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| Mailing Address | 7.0.1 | M = M / D = D / Y = Y = Y = Y |
| City | State Zip Code | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer | Occupation | |
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| SUBTOTAL of Receipts This Page (optional | il) | 370.00 |
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| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 32 OF 38 (check only one) |
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| Any information copied from such Reports and Si or for commercial purposes, other than using the | tatements mand a | ay not be sold or used by any pe | erson for the purpose of soliciting contributions to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) American Academy of Family Pl | hysicians | s Political Action Comm | iittee |
| Full Name (Last, First, Middle Initial) American Academy of Family Physicia Mailing Address 11400 Tomahawk Creek Pkwy City Leawood FEC ID number of contributing federal political committee. Name of Employer | State KS | | Date of Receipt O1 15 2014 Transaction ID : C2526921 Amount of Each Receipt this Period 524.15 |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 524.15 | |
| Full Name (Last, First, Middle Initial) 3. Mailing Address City | State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer | C | | Amount of Each Receipt this Period |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ | |
| Full Name (Last, First, Middle Initial) Mailing Address City | State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer | C | 1 | Amount of Each Receipt this Period |
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| S | CHEDULE B (FEC Form 3X) | | | | OP. | I INIE | MI | JMBEF | · · | | | Р | AGE | 33 | OF | 38 |
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| ΙT | EMIZED DISBURSEMENTS | | arate schedule(s | \ I | _ | k only | | | | | | | | | | |
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| \vdash | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | | | |
| $ \rangle$ | American Academy of Family Phys | sicians F | Political Acti | on C | on | nmit | tee | Э | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | | | | | | | |
| A. | American Express | | | | | | | Date of | of Di | | eme | ent / | Y | Y I Y | Υ | |
| | Mailing Address PO Box 53852 | | | | | | | 01 | | (|)2 | | _ 2 | 2014 | | |
| | | State | Zip Code | | | | | Tran | sact | ion IC |) · D |)1513 | 276 | | | |
| | Phoenix | AZ | 85072-3852 | | | | | man | Juci | | | ,,,,,, | ,,, | | | |
| | Purpose of Disbursement Bank card processing fee | | | П | | | | Amour | nt of | Each | Dis | sburs | emer | t this | Peri | od |
| | Candidate Name | | | | tego Type | | | | Ι | , | | , | | 1 | 1.86 | |
| | Office Sought: House Disburser | ment For: | | | | | | | | | | | | | | |
| | | Primary | General | | | | | | | | | | | | | |
| | President | Other (spe | cify) 🔻 | | | | | | | | | | | | | |
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| R | Full Name (Last, First, Middle Initial) | | | | | | | Date of | of Di | ehure | ama | nt | | | | |
| ٥. | American Express | | | | | | | Date | , | | | , III | V | / I Y | V | |
| | Mailing Address PO Box 53852 | | | | | | | 01 | ' ' | | 03 | ' | | 2014 | Υ | |
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| | | State | Zip Code | | | | | Tran | sact | ion II |) : C | 0151: | 377 | | | |
| | Phoenix Purpose of Disbursement | AZ | 85072-3852 | | | | | | | | | | | | | |
| | Bank card processing fee | | | | | | | Amour | nt of | Each | Dis | sburs | emer | t this | Peri | od |
| | Candidate Name | | | | tego Type | ry/ | | | Ξ | 7 | | , | | | 3.25 | |
| | Office Sought: House Disbursen | nent For: | | | | | | | | | | | | | | |
| | Senate | Primary | General | | | | | | | | | | | | | |
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| | Mailing Address PO Box 53852 | | | | | | | 01 | | (|)6 | | _ 2 | 014 | | |
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| [s | Senate President | Primary Other (spe | cify) ▼ | | | | | | _ | 7 | | | | 9: | 9.61 | |
| H | Senate President State: District: | Primary Other (spe | cify) ▼ | | | <u> </u> | | <u> </u> | - | 7 | | | | 99 | 9.61 | |

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| S | CHEDULE B (FEC Form 3X) | | | | FOR | LINF | NUME | BER | : | | | PA | GE | 34 (|)F | 38 |
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| IT | EMIZED DISBURSEMENTS | | arate schedule(s) category of the | \ I | (chec | k only | one) | | _ | , | _ | _ | | | | |
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| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | | | |
| | American Academy of Family Phys | icians F | Political Acti | on (| Com | mitt | tee | | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | | | | | | | | | |
| Α. | American Express | | | | | | Da | te o | f Dis | sburse | | | Y | Υ | Y | |
| | Mailing Address PO Box 53852 | | | | | | L | 01 | _ | 0 |)6 | L | _ 20 |)14 | _ | |
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| υ. | American Express | | | | | | Da | ie o | | | | 111 | | Y | V | |
| | Mailing Address PO Box 53852 | | | | | | IVI | 01 | | | 13 | / L | |)14 | Y | |
| | | State AZ | Zip Code | | | | Т | rans | sact | ion ID | | 15342 | 23 | | | |
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| | | Primary | General | | | | | | | | | | | | | |
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| | Purpose of Disbursement Bank card processing fee | | | | - | \neg | | | | | | | | | | |
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| | Office Sought: House Disbursen | nent For: | l | | | | | | | 7 | | - 1 | | | | |
| | Senate | Primary | General | | | | | | | | | | | | | |
| | President | Other (spec | cify) ▼ | | | | | | | | | | | | | |
| _ | State: District: | | | | | | | | | | | | | | | |
| 5 | UBTOTAL of Disbursements This Page (optional) | | | | | • | | | | - | | | | 9 | .23 | |
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| SCHEDU | LE B (FEC Form 3X) | | | FOR L | INE N | IUMBER: | | | PAGE | 35 (| OF 38 |
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| ITEMIZE | DISBURSEMENTS | Use separate so for each catego | | (check | only | - | | | | | |
| | | Detailed Summa | | | | 22 | 23 | | 24 | 25 | 26 |
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| | on copied from such Reports and States ercial purposes, other than using the nar | | | | | | | | | | |
| NAME OF | COMMITTEE (In Full) | | | | | | | | | | |
| Amerio | can Academy of Family Phys | sicians Politic | al Action | n Comi | mitte | ee | | | | | |
| | e (Last, First, Middle Initial) | | | | | | | | | | |
| A. Americ | can Express | | | | | Date of | f Disburs | seme | | YY | Y |
| Mailing Ad | ldress PO Box 53852 | | | | | 01 | | 28 | L. | 2014 | |
| City | | State Zip C | | | | Trans | action I | ח י ח | 153425 | | |
| Phoenix | f Dishurasmant | AZ 8507 | 72-3852 | | | | | | .00 .20 | | |
| Bank car | of Disbursement d processing fee | | | | | Amount | t of Eac | h Dis | burseme | ent this | Period |
| Candidate | | | | Category Type | // | | , | | | 16 | 6.25 |
| Office Sou | | ment For: | 0 | | | | | | | | |
| | Senate President | Primary Other (specify) | General | | | | | | | | |
| State: | District: | Culci (opeony) | • | | | | | | | | |
| Full Name | (Last, First, Middle Initial) | | | | | | | | | | |
| | can Express | | | | | Date of | Disbur | | | | |
| Mailing Ac | ddress PO Box 53852 | | | | | 01 | / D | 10 | / Y | 2014 | Y |
| City Phoenix | | State Zip C AZ 8507 | Code 72-3852 | | | Trans | action l | D : D | 151381 | | |
| | of Disbursement d processing fee | | | | ╗ | Amount | t of Eac | h Dis | burseme | ent this | Period |
| Candidate | Name | | | Category Type | // | | | | | 14 ⁻ | 7.84 |
| Office Sou | ught: House Disburse | ment For: | | 71 | | | , | | , | | |
| | Senate | , | General | | | | | | | | |
| State: | President District: | Other (specify) ▼ | 7 | | | | | | | | |
| | (Last, First, Middle Initial) | | | | | Data of | Disbur | omo | nt | | |
| o. Americ | can Express | | | | | | _ | | | | |
| Mailing Ad | ddress PO Box 53852 | | | | | 0 <u>1</u> | / | 29 | | 2014 | Y |
| City Phoenix | | State Zip C AZ 8507 | Code '2-3852 | | | Trans | action I | D : D | 153655 | | |
| Purpose of | f Disbursement | 7.2 0007 | 2 3032 | | _ | | | | | | |
| | d processing fee | | | | | Amount | t of Eac | h Dis | burseme | ent this | Period |
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| | Senate | . , | General | | | | | | | | |
| 01-1 | President | Other (specify) | • | | | | | | | | |
| State: | District: | | | | | | | | | | |
| SUBTOTAL | of Disbursements This Page (optional) | | | | <u> </u> | | | | -, | 172 | 2.04 |
| TOTAL This | Period (last page this line number only |) | | | • | | | | | | |

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| SCHEDULE B (FEC Form 3X) | | FOR LINE I | NUMBER: | PAGE 36 OF 38 |
|---|---|-------------------|--------------------|------------------------|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | one) | |
| | Detailed Summary Page | X 21b 27 | 22 23 28b | 24 25 26 28c 29 30b |
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| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | | | | |
| NAME OF COMMITTEE (In Full) | | | | |
| American Academy of Family Phys | icians Political Actio | n Committe | ee | |
| Full Name (Last, First, Middle Initial) | | | Data of Dishuras | ont . |
| A. Bank Of America Merchant Service | es | | Date of Disburseme | ent |
| Mailing Address WA2-505-01-40 | | | 01 31 | 2014 |
| PO Box 2485 | Note 7th On the | | | |
| , | State Zip Code WA 99210-2485 | | Transaction ID : D | 0153728 |
| Purpose of Disbursement | 00210 2400 | | | |
| Excess transaction fee bank fee | | | Amount of Each Dis | sbursement this Period |
| Candidate Name | | Category/ | | 27.90 |
| Office Sought: House Disbursen | nent For: | Туре | 7 | 4 |
| | Primary General | | | |
| | Other (specify) ▼ | | | |
| State: District: | | | | |
| Full Name (Last, First, Middle Initial) B. Bank Of America Merchant Service | | | Date of Disburseme | ant |
| B. Bank Of America Merchant Service | : 5 | | M M / D D | / Y Y Y Y |
| Mailing Address WA2-505-01-40 PO Box 2485 | | | 01 02 | 2014 |
| Spokane | State Zip Code WA 99210-2485 | | Transaction ID : [| 0151380 |
| Purpose of Disbursement Bank card processing fee | | | Amount of Each Dis | sbursement this Period |
| Candidate Name | | Category/ | | 234.87 |
| Office Sought: House Disbursen | aont For: | Type | | 254.01 |
| | nent For: Primary General | | | |
| | Other (specify) ▼ | | | |
| State: District: | | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Diel | |
| C. | | | Date of Disburseme | |
| Mailing Address | | | M M / D D | / |
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| Purpose of Disbursement | | | | |
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| Candidate Name | | Category/ Type | | |
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| | Primary General | | | |
| State: District: | Other (specify) ▼ | | | |
| State. DISTRICT. | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | 262.77 |
| COLUMN TITO F AGO (OPHORA) | | | | |
| TOTAL This Period (last page this line number only) | | | | 543.65 |

| SCHEDULE B (FEC Form 3X) | No. of the state o | FOR LINE N | IUMBER: PAGE 37 OF 38 |
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| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | |
| | Detailed Summary Page | 21b | 22 🗙 23 📗 24 📗 25 📉 26 |
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| or for commercial purposes, other than using the r | ame and address of any political | committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| American Academy of Family Ph | vsicians Political Action | Committe | 26 |
| / / interredit / teadering of it diring it in | yorolario i ollitoar / totiori | 00111111111 | |
| Full Name (Last, First, Middle Initial) | | | |
| A. Democratic Congressional Camp | aign Committee | | Date of Disbursement |
| | | | M M / D D / Y Y Y Y |
| Mailing Address 430 S Capitol St SE | | | 01 27 2014 |
| FI 2 | | | |
| City | State Zip Code | | Transaction ID : D151775 |
| Washington | DC 20003-4024 | | Transaction is . Stott 10 |
| Purpose of Disbursement Campaign contribution | | | |
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| Senate | Primary General | | |
| President | Other (specify) ▼ | | |
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| B. National Republican Congression | nal Committee | | Date of Disbursement |
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| Mailing Address 320 1st St SE | | | 01 27 2014 |
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| | State Zip Code | | T |
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| Washington | DC 20003-1838 | | Transaction ID: D153515 |
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| Washington Purpose of Disbursement Campaign contribution | DC 20003-1838 | | Amount of Each Disbursement this Period |
| Washington Purpose of Disbursement | DC 20003-1838 | Category/ | |
| Washington Purpose of Disbursement Campaign contribution Candidate Name | DC 20003-1838 | Category/ Type | Amount of Each Disbursement this Period |
| Washington Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Disburs | DC 20003-1838 | | Amount of Each Disbursement this Period |
| Washington Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Senate | DC 20003-1838 Sement For: Primary General | | Amount of Each Disbursement this Period |
| Washington Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Disbursement Senate President | DC 20003-1838 | | Amount of Each Disbursement this Period |
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| Washington Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT MICHE | DC 20003-1838 Sement For: Primary General Other (specify) | Туре | Amount of Each Disbursement this Period 15000.00 Date of Disbursement |
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| Washington Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT MICHE Mailing Address 2015 DIETZ PL NW City ALBUQUERQUE Purpose of Disbursement | DC 20003-1838 Sement For: Primary General Other (specify) ▼ SLLE LUJAN GRISHAM State Zip Code NM 87107 | Туре | Amount of Each Disbursement this Period 15000.00 Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
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| Washington Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT MICHE Mailing Address 2015 DIETZ PL NW City ALBUQUERQUE Purpose of Disbursement Campaign contribution Candidate Name Rep. Michelle Lujan Lujan Grisha | DC 20003-1838 Sement For: Primary General Other (specify) SLLE LUJAN GRISHAM State Zip Code NM 87107 | Type Category/ | Amount of Each Disbursement this Period 15000.00 Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
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| SCHEDULE B (FEC Form 3X) | | EOD LINE | NUMBER: PAGE 38 OF 38 | |
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| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | - | FOR LINE NUMBER: (check only one) | |
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| or for commercial purposes, other than using the name | e and address of any politica | al committee to | solicit contributions from such committee. | |
| NAME OF COMMITTEE (In Full) | | • | | |
| ightarrow American Academy of Family Phys | icians Political Actio | n Committ | ee | |
| Full Name (Last, First, Middle Initial) | | | | |
| A. FRIENDS OF MARK WARNER | | | Date of Disbursement | |
| | | | M M / D D / Y Y Y Y | |
| Mailing Address 201 NORTH UNION STREET SUIT | E 300 | | 01 27 2014 | |
| City | State Zip Code | | | |
| ALEXANDRIA | VA 22314 | | Transaction ID : D151774 | |
| Purpose of Disbursement | | | | |
| Campaign contribution | | | Amount of Each Disbursement this Period | |
| Candidate Name | | Category/ | 2500.00 | |
| Sen. Mark Warner | | Туре | 2300.00 | |
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